## **Community Service Network 6 Meeting DHHS Offices, 161 Marginal Way, Portland** November 16, 2007

## **Approved Minutes**

Mer	nbers	Pres	ent:

<ul> <li>Jan Burns, AIN</li> <li>Art DiMauro, Casco Bay Mental Health</li> <li>Don Harden, Catholic Charities</li> <li>Kitty Purington, Community Counseling Center</li> <li>Tracy Quadro, Community Mediation Services</li> <li>Karen Evans, Consumer Council of Maine</li> <li>Lois Jones, Counseling Services Inc.</li> <li>Phoebe Prosky, Freeport Counseling</li> </ul>	<ul> <li>Glenn Shelton, Goodwill Industries</li> <li>Michelle Belhumeur, Gorham House</li> <li>Burma Wilkins, Mercy Hospital</li> <li>Christine McKenzie, MMC/Vocational Services</li> <li>Jennifer Tingley Prince, NOE</li> <li>Jon Bradley, Preble Street</li> <li>Michael Faust, PSL Services</li> <li>Joe Brannigan, Shalom House Inc</li> </ul>	<ul> <li>Amy Thomas, Smart Child &amp; Family</li> <li>Joyce Cotton, Spring Harbor Hospital</li> <li>Catherine Snow, Spurwink/Portland Help Ctr</li> <li>Alex Veguilla, Sweetser Peer Center</li> <li>Kelli Star Fox, Transitions Counseling</li> <li>Christine Holler, Transition Planning Group</li> <li>Sarah Rawlings, VOA</li> <li>Michael Tarpinian, Youth Alternatives/Ingraham</li> </ul>
Members Absent:		
<ul> <li>Amistad (excused)</li> <li>Creative Work Systems (excused)</li> <li>Crossroads for Women</li> <li>Hawthorne House</li> </ul>	<ul> <li>Mid Coast Hospital (excused)</li> <li>NAMI Families (excused)</li> <li>Parkview Adventist Medical Center</li> </ul>	<ul><li>Spring Harbor (excused)</li><li>Sweetser (excused)</li><li>Work Opportunities Unlimited</li></ul>
Alternates/Others present:		

• Sally Temm, Catholic Charities Dianne Nelder, Youth Alternatives/Ingraham • Don Burns, AIN (CSN 7)

Staff present: DHHS/OAMHS: Don Chamberlain, Jamie Morrill, Carlton Lewis. Muskie School: Elaine Ecker.

	Agenda Item	Presentation, Discussion	
I.	Welcome and Introductions	ome and Introductions Carlton opened the meeting and participants introduced themselves.	
II.	Review and Approval of Minutes	The September minutes were approved as written. Members requested that the following items be added to the meeting agenda:  • APS Healthcare – ASO Implementation • Section 17 Changes	
III.	Budget Update	Ron Welch was unable to attend the meeting to give an update on the budget process.	
IV.	<ul> <li>Work Plan Subcommittee Reports</li> <li>Housing – Standards 12(1), 13, 14 Joe Brannigan reported that good efforts continue on the BRAP funding issue. The Department agreed to put in for \$500,000, he said, and the Governor is aware. However, the Governor is also ready to project an approximat shortfall of revenue.</li> </ul>		
		Karen Evans passed around a petition to increase BRAP funding for members to sign if they wished. Blank petitions were also available for members to take to gather signatures. Those should be returned to Karen.	
		Jon Bradley, chair of the Homeless Council, will add BRAP discussion to their agenda.	

Agenda Item Presentation, Discussion	
	Vocational – Standard 26 Christine McKenzie reported that MMC Vocational Services is involved in finalizing the contract awarded to them through the RFP issued from OAMHS to improve employment through the services of seven employment specialists working throughout the State. More information will be available at the next meeting.
	Recovery - Standard 33: Subcommittee did not meet due to scheduling difficulties.
	Hospital Readmissions Members were unable to attend today's meeting. (Report they are still waiting for data from the Maine Data Organization through the consultant OAMHS has hired.)
V. CSN Direction re: Subcommittee Work	Don Chamberlain asked members to discuss the focus of the CSN's work, noting that the subcommittee work is the major component of the monthly meeting agenda. He suggested they might choose to restructure the meeting schedule (meet less often to allow time for subcommittees to meet) or focus on different tasks.
	Members discussed restructuring the regular meeting agenda to include time for subcommittees to meet, concurring on the importance of the whole CSN continuing to meet monthly, due to the many important issues facing mental health services. The following motion was made, seconded, and passed:
	MOTION: To structure the regular meeting to be part subcommittee work and part larger group meeting.
	Don reviewed the tasks of the current subcommittees and the Consent Decree Standards related to each. Elaine will email the current membership list and tasks out to all members, so those not yet involved in subcommittee work may choose one to join.
	ACTION: Members will choose a subcommittee to join and notify the subcommittee chairperson.
	It was decided that the regular monthly meeting will proceed as follows: Open meeting together: introductions, business items, break up for one hour of subcommittee work, the come back together to report out.
VI. Update on Preble Street/ Case Management	Jon Bradley reported on progress since the initial meeting of area providers (discussed at last month's meeting), noting that a follow-up meeting is scheduled for November 30.
	<ul> <li>Providers willing to come on site for intake – still working on how to do assessments (limited staff to do assessments)</li> <li>Youth Alternatives/Ingraham is will to provide psychiatric services on site – working out details to best utilize the service.</li> <li>Preble St. is looking through caseloads to make sure they are not duplicating services – moving people to services through appropriate agencies.</li> <li>Preble St. is creating a better system at intake to immediately identify who needs referral.</li> <li>Preble St. has created a space to be booked at any time for providers to come on site.</li> <li>Major increase in ICM outreach work – may be able to help people transition into the system more quickly.</li> </ul>

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	<ul> <li>Discussed need for providers to have extensive training in MaineCare to help expedite the process for clients. All Preble St. staff soon will be attending a 3-4 hour MaineCare training (set up by DHHS and held at Marginal Way-Jon didn't know if others could attend.)</li> <li>Women's shelter needs additional vouchers, general assistance, and caseworkers. They don't have enough staff to help people find apartments, and other agencies have helped with that.</li> </ul>	
	Sally Temm of Catholic Charities informed that they have hired a second Spanish-speaking case manager. They are working on getting to Preble St. to assess the significant Spanish-speaking population in the shelters. She also noted that the MaineCare training has been held at Catholic Charities twice and was very helpful.	
	Don asked the group if such MaineCare trainings would be helpful for their staff, and members indicated that it would.	
VII. Other	Budget Work Groups Update Administrative Burden, System Redesign, Rate Standardization  Don said that the Administrative Burden and System Redesign Work Groups are finalizing their recommendations for submission to Geoff Green and then the Governor. Karen Evans, a member of the System Redesign Work Group, added that they have finished their initial work, but are now focusing on additional redesign possibilities in the event of future cuts.	
	Section 17 Changes Kitty Purington reported that Section 17 is up for review and encouraged members to look at the proposed changes. The hearing is Monday, November 19, at 1 p.m. Changes include a lot of managed care language [due to new ASO Administrative Organization], she said, and mentioned other specific proposed changes of particular concern:	
	<ul> <li>"OR" paragraph removed from Eligibility for Care (re: members continuing to be eligible for services if decline would be expected without those services). "Eliminating that paragraph will make several of our folks ineligible for servicesGAF score will become cyclical."</li> <li>Medication Management removed from Section 17—considered duplicative—Medication Management in Section 65 remains.</li> </ul>	
	Members received a copy of a memo from the Office of MaineCare Services that lists the changes and includes the website address where the entire document may be reviewed.	
	Don encouraged members with comments to either attend the hearing in person or put them in writing.	
	APS Healthcare – ASO Implementation  Members brought up the short timeline between APS Healthcare trainings and implementation. A member queried, "What is the value of the CSN relative to these huge efforts?"	
	Don responded that the CSN could take a position, as CSN 2 did, and let the collective will be known. He explained that the ASO is "seen as managing care, but continuity of care issues still rest with the CSN." The ASO will be providing much better data to the CSNs to act upon.	

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	In response to a member's request for more information about what CSN 2 is doing, Don explained: CSN 2 members decided to draft a memo to officials (Governor, DHHS Commissioner, etc.), listing all the member organizations, addressing two main issues: 1) The December 1 implementation date is too soon, not allowing enough time between training sessions and "go live," and 2) the January 1 date with MECMS link (reimbursement) is too soon, and need to postpone implementation and ensure testing with MECMS.	
	Don further explained that CSN 2 voted that the memo, once finalized among its members, will be distributed to all CSN members. CSN 2 expected to provide the final version to Elaine for distribution to all members on Monday, Nov. 19.	
	The group engaged in a discussion about the best way to join with that effort and possible alternatives to the present implementation plan—and decided to support "the Bangor approach" as follows:  1. Members will receive the CSN 2 memo on or about Nov. 19.  2. After receiving, immediately send any comments to Sally Temm.  3. Sally will then draft a memo from CSN 6 and distribute to members for comment on a short timeline.	
	<ol> <li>No later than Nov. 30, the CSN's final memo will be sent to the Commissioner, Governor, and members of the Health and Human Services Committee.</li> </ol>	
	Karen Evans voiced another concern: Registration with the ASO without notifying consumers that their "information is being shared again." A provider member responded it should be the Department's responsibility to provide notice to the consumers.	
	ACTION: Don will get an answer on consumer notification to Karen.	
	Members also received a multi-page handout from APS Healthcare on access to its CareConnection online program.	
VII. Public Comment	No members of the public made comments at this time.	
VIII. Agenda for Next Meeting	Budget/Legislative Update Subcommittee Meetings and Reports	